



Matthew Dunlap
Secretary of State

**Department of the Secretary of State
Bureau of Motor Vehicles**

BAC

LAW ENFORCEMENT OFFICER'S REPORT TO THE SECRETARY OF STATE

NAME: _____	DATE OF OFFENSE: _____
ADDRESS: _____	TIME OF OFFENSE: _____
D.O.B.: _____ BA CONCENTRATION 0. _____ %	PLACE OF OFFENSE: _____

THE ABOVE-NAMED PERSON OPERATED OR ATTEMPTED TO OPERATE (check all boxes that apply):

- BAC .08** ☐ a motor vehicle while having 0.08% or more by weight of alcohol in the blood
- ANY ALC COND** ☐ a motor vehicle while having any amount of alcohol in the blood with a conditional license
- PASS< 21 YRS** ☐ a motor vehicle with a passenger under 21 years of age
- BAC .04 CMV** ☐ a commercial motor vehicle while having 0.04% or more by weight of alcohol in the blood
- BAC .04 HAZ MAT** ☐ a commercial motor vehicle containing hazardous materials while having 0.04% or more by weight of alcohol in the blood
- ANY ALC MINOR** ☐ a motor vehicle while having any amount of alcohol in the blood while under 21 years of age
- FATAL** ☐ a motor vehicle involved in an accident where a death has or will occur

OFFICER'S STATEMENT OF PROBABLE CAUSE: _____

(Continue statement on reverse)

NOTE: If a chemical test is taken using an intoxilyzer, the certified results must accompany this form.

Sworn before me under oath:

(Notary Public)

Dated: _____

End Commission Date: _____

(Signature of Officer)

(Officer's Name Printed or Typed)

(Department of Officer)

THIS FORM MUST BE RETURNED TO THE SECRETARY OF STATE IMMEDIATELY

Bureau of Motor Vehicles, 29 State House Station, Augusta, Maine, 04333-0029

Telephone: 207-624-9000 Extension: 52106